



# COMMONWEALTH of VIRGINIA

HAROLD W. CLARKE  
DIRECTOR

*Department of Corrections*

P. O. BOX 26963  
RICHMOND, VIRGINIA 23261  
(804) 674-3000

## Ombudsman Services Unit

May 2, 2023

Isaw Blake #1106405  
Wallens Ridge State Prison  
P. O. Box 759  
Big Stone Gap, Virginia 24219

Dear Isaw Blake #1106405,

This office received correspondence from you regarding PSCC-23-INF-00073 and an alleged assault. After a review of your correspondence for PSCC-23-INF-00073, I find that your Regular Grievance should not have been accepted for intake by the Regional Ombudsman, however for the reason of Expired Filing Time. In accordance with Operating Procedure 866.1, *Inmate Grievance Procedure*, "If the inmate disagrees with the intake decision, the inmate has five days to appeal the decision." Institutional Ombudsman C. Smalling made the intake decision in this case on February 8, 2023. The Regional Ombudsman did not receive your intake appeal until March 3, 2023, well past the five-day time limit.

The alleged assault referenced in your correspondence was addressed by PSCC-22-REG-00083. You received Level I and Level II Responses which were both determined to be unfounded. As noted in your Level II Response, Level II was your last level of appeal. Please find enclosed your correspondence for your records.

Sincerely,

  
R. Perry, Manager  
Ombudsman Services Unit

cc: file



Virginia Department of Corrections

# Institutional Classification Authority Hearing Notification Form

DOC-11G

DOC Location: Pocahontas State  
Correctional Center

Report generated by Dillon, J D

Report run on 09/13/2022 at 09:31 AM

Offender Name: Blake, Isaw W

DOC#: 1106405

DOC Location: Pocahontas State  
Correctional Center

## Part I: ICA Referral Notice

Classification Action being reviewed: Internal Status

Comments: On 09-13-22 at approx 09:15am Inmate I. Blake # 1106404 was placed in RHU on GDT status after physically assaulting a staff member. Inmate will be scheduled for his ICA and MDT for appropriate housing.

You will be scheduled to appear before the Institutional Classification Authority on or after 9/15/2022

Authorizing Staff

Date &amp; Time 9-13-22 9:35 AM

A formal due process hearing is required when an offender is considered for removal from general population, or faces the possibility of increase in security level or reduction in good time earning level outside the Annual Review Cycle. You will be permitted to: 1) Be present at the hearing 2) Remain silent 3) Know the reasons for any decisions rendered by the ICA 4) Have your counselor or an employee present to assist you 5) Receive a copy of the written findings and recommendations of the ICA. During hearings based solely on documented Disciplinary Hearing Referrals the following is not afforded to you: 1) Hearing the Reporting Officer's testimony 2) Cross-examining adverse witnesses 3) Calling and cross-examining witnesses.

This is to certify that I have received a copy of this notice and it was explained to me. I am requesting witness/s to appear on my behalf.

Witness Request: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

I Waive rights to 48-hour notice. ☐ Yes ☐ No

I wish to attend. ☐ Yes ☐ No

Unable to sign 5 point restraint  
Offender Signature \_\_\_\_\_  
Date \_\_\_\_\_

Witness Signature \_\_\_\_\_  
Date 9/13/22



Virginia Department of Corrections

**Institutional Classification Authority Hearing**

DOC-11H

DOC Location: Wallens Ridge State Prison

Report generated by Thompson, N

Report run on 12/18/2023 at 02:46 PM

**Offender Name:** Blake, Isaw W    **DOC#:** 1106405    **DOC Location:** Pocahontas State Correctional Center    **Bed Assignment:** B-2-229-T

**Part I: ICA Referral Notice**

You were scheduled to appear before the Institutional Classification Authority on or after 09/13/2022 for Transfer

Comments: Administrative transfer per Warden T. Hicks due to physical assault on staff member.

Authorizing Staff

Date &amp; Time

Hearing Date:

Offender Statement:

Reporting Staff Comments:

**Part II: Hearing Disposition****Transfer Review:**

The ICA recommends: Transfer to Wallens Ridge State Prison

Rationale: Administrative transfer per Warden T. Hicks due to physical assault on staff member.

ICA: Smith,  
Brandon K

Date: 9/13/2022

**Administrative Review:**

Decision: Approve

Transfer to Wallens Ridge State Prison

Collins, David

Date: 9/13/2022

Comments:

**CCS Review:**☒ Approve

Transfer to Wallens Ridge State Prison

Ford, Troy R

Date: 9/13/2022

Comments: temp transfer approved. inmate to be reclassified to appropriate SL and class level upon completion of investigation and any institutional infractions to be determined.

DEPARTMENT OF CORRECTIONS

Exhibits C

WALLENS RIDGE STATE PRISON  
WRITTEN COMPLAINT 866 F3 6-21mailed  
1-9-23RECEIVED  
JAN 18 2023

## Written Complaint

JAN 05 2023  
WALLENS RIDGE STATE PRISON

## Instructions for filing

- You should first use the verbal complaint process and discuss your issue with staff before submitting this Written Complaint.
- You must explain your issue in the space provided below, preferably in ink.
- You must fill your Written Complaint form out completely and correctly
- Your Written Complaint must be received within 15 days of the original incident or discovery of the incident.
- You are limited to only one issue per Written Complaint.
- You may file a Regular Grievance if you do not receive a response within 15 days.
- You are not required to submit a Written Complaint for alleged incidents of sexual abuse and sexual harassment or when the informal complaint process is satisfied by other documentation.

Offender Name: Blake, Isaac # 1106405 Housing Assignment: C-1-129 C-134  
 Individuals Involved in Incident: Off. Sagady Date/ Time of Incident: 1-4-23 10:39 am

TO: Lt. Boyd

(You must address your issue to institutional staff or an institutional department)

In the space provided explain your issue (be specific): On 1-4-23 Members from PSCC Conducted a  
Shake down here at WRSP on C-1 Pod. At approx. 7:30 am; a very Skinny officer wearing glasses  
came to my cell-129 then yelled out to "Sagady, (who led a Mob attack against me on 9-13-22 at PSCC) "Hey Sagady,  
eres Blake's Cell!" At that moment I was again afraid for my life. I then got up and looked into the Pod and  
I saw "Sagady" with other officers, they were all pointing and grinning and laughing at me. Officers then  
Escorted me into the middle of the Pod to stand directly in front of "Sagady... it was Humiliating and  
and very painful to see him after what he had done to me. Now 10:39 am 1-4-23, after my cell was shook-  
down I was escorted into my room. "Sagady" walked up to my cell and said to me. "You still look like shit.  
I can't take your life but I'll take your crap. And you'll see that I got "Friends out here. I aint done, George!"

Offender Signature: Isaac Blake #1106405 Date: 1-5-23

Offenders - Do Not Write Below This Line

Date Received: 01/18/2023 Response Due: 02/02/2023 Log Number: PSCC-23-INF-12073

Assigned to: MajorAction Taken/Response: 0

AFTER SPEAKING WITH OFFICER SAGADY NO OFFICERS FROM  
PSCC SEARCHED INMATE BLAKE'S CELL. AND THE ABOVE  
ACCUSATIONS DID NOT OCCUR. OFFICER SAGADY DID NOT  
TALK TO INMATE BLAKE AT THIS TIME. @

Respondent Signature: May Watts Printed Name and Title: MAJOR JEWETT Date: 1-25-2023

## Withdrawal of Complaint:

I wish to voluntarily withdraw this complaint. I understand that by withdrawing this written complaint, there will be no further action on this issue nor will I receive a response to this complaint. I understand that I may resubmit this same issue once and only once on a new Written Complaint as long as the original 15-day time limit has not expired.

Offender Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Witness: \_\_\_\_\_ Date: \_\_\_\_\_

RECEIVED GRIEVANCE DEPT.  
DEPARTMENT OF CORRECTIONS

Regular Grievance 866\_FI\_10-20

FEB 02 2023

## Regular Grievance

Log Number: \_\_\_\_\_

## INSTRUCTIONS FOR FILING A REGULAR GRIEVANCE

- You must first attempt to resolve your issue through the informal complaint process prior to filing a Regular Grievance.
- You must attach the *Written Complaint* or other documentation used to satisfy the informal complaint process.
- Your grievance must be received within 30 days from the original incident or discovery of the incident, unless a more restrictive time limit applies.
- You must fill your *Regular Grievance* out completely and correctly
- You must explain your issue and how you were personally affected in the space provided, preferably in ink.
- You must avoid the reasons for rejection at intake; if your grievance is rejected you have 5 days to appeal the rejection.
- When multiple issues are submitted on the same grievance, you will only receive a response to the exact same issue addressed through the informal complaint process. All other issues will be forwarded to appropriate staff for investigation and resolution.

Offender Name (Last Name, First)

Offender Number

Housing Assignment

Individuals Involved in Incident:

1-4-2023

Date/ Time of Incident

## Results of the Informal Complaint Process (Select one of the below)

- ☒ Written Complaint on this issue attached
- ☐ Other documentation used to satisfy the informal complaint process is attached
- ☐ Informal complaint process is not required for this issue

Explain Your Issue: (Provide a detailed explanation of the issue, your attempts to resolve the issue and how you were personally affected.)

On 1-4-23 Members from PSCC conducted a shake down here a WRSP on C-1 Pod. At 10:39 am on 1-4-23, after my Cell was shook down % Sagady walked up to my Cell and said to me. "You still look like shit. I can't take your life but I'll take your crap, And you'll see that I got friends out here. I aint done George."

Suggested Remedy: (Identify in the space provided below, the action you want taken)

I want % Sagady Fired and I want a "Stay-away order" placed on % Sagady and every other Staff Member whom was invalred in Assaulting me at PSCC, on 9-13-22

Offender Signature

Date



Exhibit D

VIRGINIA  
DEPARTMENT OF CORRECTIONSRECEIVED GRIEVANCE DEPT  
Written Complaint 866\_F3\_6-21

MAY 03 2023

## Written Complaint

## Instructions for filing:

WALLENS RIDGE STATE PRISON

- You should first use the verbal complaint process and discuss your issue with staff before submitting this *Written Complaint*.
- You must explain your issue in the space provided below, preferably in ink.
- You must fill your *Written Complaint* form out completely and correctly.
- Your *Written Complaint* must be received within 15 days of the original incident or discovery of the incident.
- You are limited to only one issue per *Written Complaint*.
- You may file a *Regular Grievance* if you do not receive a response within 15 days.
- You are not required to submit a *Written Complaint* for alleged incidents of sexual abuse and sexual harassment or when the informal complaint process is satisfied by other documentation.

Blake, Isaac      1106405      61-134-B  
Offender Name      Offender Number      Housing Assignment  
% Blackburn      5/2/2023      1:59 pm  
Individuals Involved in Incident      Date/ Time of Incident

TO: Unit Manager Boyd  
(You must address your issue to institutional staff or an institutional department)

## In the space provided explain your issue (be specific):

Today 5/2/2023, Time approx 1:59pm; % Blackburn announced from the booth while holding the gun, "5 minutes left in pod rec". I showed % Blackburn my Jpb, indicating that we are owed more time. % Blackburn then stated, "That's not what my watch got, any ways you like to hit staff? you lucky you not getting shot." I ask for protection from your staff from retaliation of what took place with me involving officers at Pocahontas State Correctional Center

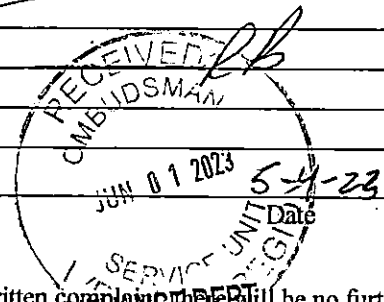
Offender Signature: Isaac Blake 1106405      Date: 5/2/2023  
Offenders - Do Not Write Below This Line

Date Received: 5-3-23      Response Due: 5-18-23      Log Number: WRSP-23-INF-018246  
Assigned to: UM Boyd  
Action Taken/Response:

I spoke with Officer Blackburn, and he denied saying anything to you.

UM Boyd  
Respondent Signature

UM R. Boyd  
Printed Name and Title



## Withdrawal of Complaint:

I wish to voluntarily withdraw this complaint. I understand that by withdrawing this written complaint there will be no further action on this issue nor will I receive a response to this complaint. I understand that I may resubmit this same issue once and only once on a new *Written Complaint* as long as the original 15-day time limit has not expired.

Offender Signature:

Date:

Staff Witness:

WALLENS RIDGE STATE PRISON  
Date:

MAY 11 2023



VIRGINIA  
DEPARTMENT OF CORRECTIONS

Regular Grievance 866\_F1\_10-20

## Regular Grievance

Log Number: 00194

## Instructions for Filing:

- You must first attempt to resolve your issue through the informal complaint process prior to filing a *Regular Grievance*.
- You must attach the *Written Complaint* or other documentation used to satisfy the informal complaint process.
- Your grievance must be received within 30 days from the original incident or discovery of the incident, unless a more restrictive time limit applies.
- You must fill your *Regular Grievance* out completely and correctly.
- You must explain your issue and how you were personally affected in the space provided, preferably in ink.
- You must avoid the reasons for rejection at intake; if your grievance is rejected you have 5 days to appeal the rejection.
- When multiple issues are submitted on the same grievance, you will only receive a response to the exact same issue addressed through the informal complaint process. All other issues will be forwarded to appropriate staff for investigation and resolution.

Blake, Isaac  
Offender Name (Last Name, First)

Offender Number

Housing Assignment

% Blackburn  
Individuals Involved in Incident:

1106405  
Offender Number

5/2/2023 1:59 pm  
Date/ Time of Incident

## Results of the Informal Complaint Process (Select one of the below)

- ☒ Written Complaint on this issue attached  
☐ Other documentation used to satisfy the informal complaint process is attached  
☐ Informal complaint process is not required for this issue

RECEIVED GRIEVANCE DEPT.

MAY 11 2023

Explain Your Issue: (Provide a detailed explanation of the issue, your attempts to resolve the issue and how you were personally affected.)

Today 5/2/2023, Time approx 1:59 pm, % Blackburn announced from the booth while holding the Gun, "5 minutes left in pod rec." I then walked to the red line I showed % Blackburn my Jpb indicating that we are owed more time... % Blackburn then stated, "That's not what my watch got, any ways you like to hit staff, you lucky you not getting shot." I ask for protection from your staff from retaliation of what took place with me involving officers at Pocahontas State Correctional Center. And I'm asking for a fair judgement and review the camera footage, instead Unit Manager Boyd to the word of his staff % Blackburn and did not review the camera footage.

Suggested Remedy: (Identify in the space provided below, the action you want taken)

% Blackburn is not Here (To work) for the right reasons  
 % Blackburn should be fired from the D.O.C.;  
 % Blackburn does not have the temperment to work for D.O.C.

Isaac Blake 1106405  
Offender Signature

Date

5/8/2023



VIRGINIA  
DEPARTMENT OF CORRECTIONS

Regular Grievance 866\_FI\_10-20

**Intake Decision:** (Grievances must be accepted and logged into VACORIS unless returned for the following reason(s))

<input type="checkbox"/>	<b>Non-Grievable:</b>
<input type="checkbox"/>	Disciplinary hearing decisions, penalties and/or procedural errors
<input type="checkbox"/>	Regular Grievance Intake Decisions
<input type="checkbox"/>	Limitation Decisions
<input type="checkbox"/>	State and Federal laws, regulations, and court decisions
<input type="checkbox"/>	Policies, procedures, and decisions of other agencies
<input type="checkbox"/>	Issues yet to occur
<input type="checkbox"/>	Beyond the control of the Department of Corrections
<input type="checkbox"/>	<b>Personally Affected:</b> You must identify how the issue caused personal harm or loss to you, personally.
<input type="checkbox"/>	<b>Limited:</b> You have been limited by the Facility Unit Head, and this grievance is in excess of your limit.
<input type="checkbox"/>	<b>Expired Filing Period:</b> You must submit your grievance within 30 of the original incident or discovery of the incident unless the reason for delay was beyond your control, you have not been provided formal orientation, or a more restrictive time limit has been established to prevent loss of remedy or the issue becoming moot.
<input type="checkbox"/>	<b>Repetitive:</b> You submitted this issue previously on <i>Regular Grievance</i> #
<input type="checkbox"/>	<b>Group Complaints or Petitions:</b> You must submit a grievance on your own behalf; you cannot file a grievance with a group.
<input type="checkbox"/>	<b>Photocopy/Carbon Copy:</b> You did not submit the original grievance documents.
<input type="checkbox"/>	<b>Informal Complaint Process:</b> Your issue submitted on this grievance is not the same issue addressed in your <i>Written Complaint</i> or supporting documentation, or you failed to use the informal complaint process. You must first submit a <i>Written Complaint</i> on this issue.
<input checked="" type="checkbox"/>	<b>Insufficient Information:</b> (Not to include Medical, Sexual Abuse, and Sexual Assault). You must provide the following information within 5 days before the grievance can be processed: <u>How were you</u>
<input type="checkbox"/>	<b>Request for Services:</b>

RECEIVED GRIEVANCE DEPT.

Institutional Ombudsman Signature

Date

MAY 11 2023

**Appeal of Intake Decision**

(If you disagree with the intake decision, you have 5 days from date of receipt to send an appeal of the intake decision to the Regional Ombudsman by submitting this grievance for further review.)

WALLENS RIDGE STATE PRISON

**Regional Review of Intake Decision:** The Regional Ombudsman's decision is final

<input type="checkbox"/>	The intake decision is being upheld in accordance with Operating Procedure 866.1, <i>Offender Grievance Procedure</i> .
<input type="checkbox"/>	The intake decision is being overturned and the grievance is being returned to the Facility Unit Head for response.
<input type="checkbox"/>	The intake decision is being returned to you because the 5-day time limit for review has been exceeded.

Regional Ombudsman Signature

Date

**Withdrawal of Grievance:**

I wish to voluntarily withdraw this grievance. I understand that by withdrawing this grievance, there will be no further action on this issue nor will I receive a response to this grievance. I understand that I may resubmit this same issue once and only once on a new *Regular Grievance* as long as the original 30-day time limit has not expired.

Offender Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Staff Witness: \_\_\_\_\_

Date: \_\_\_\_\_

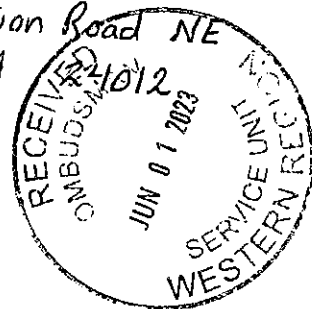




Isaw Blake 1106405  
Wallens Ridge State Prison  
272 Dogwood Drive  
Big Stone Gap, VA 24219

FREE LETTER

Regional Administrator  
3313 Plantation Road NE  
Roanoke, VA



Mailed out: 5-31-2023



## Offender Grievance Response - Level I

DOC Location: WRSP Wallens Ridge State Prison

Report generated by Ravizee, B J

Report run on 05/30/2023 at 03:55 PM

Offender Name: Blake, Isaw W

DOC #1106405

Current Location: Wallens Ridge State Prison

Housing: C-1-134-B

Filed: Wallens Ridge State Prison

Grievance Number: WRSP-23-REG-00194

Finding: Unfounded

Finding Reason:

LEVEL I: Level 1 Response

(To be completed and mailed within 30 calendar days)

**Grievance Summary:** In your grievance, you state, on 5-2-23 @ approximately 1:59 PM, Officer Blackburn holding the gun announced from the booth five minutes left in pod recreation. You walked to the red line and showed Officer Blackburn your JP6 indicated you were owed more time. Officer Blackburn then stated that is not what his watch had, and the way you like to hit staff you are lucky you are not getting shot. You want Officer Blackburn fired from the DOC.

**Written Complaint:** You submitted Written Complaint WRSP-23-INF-01826. Unit Mgr. Boyd stated, "I spoke with Officer Blackburn, and he denied saying anything to you."

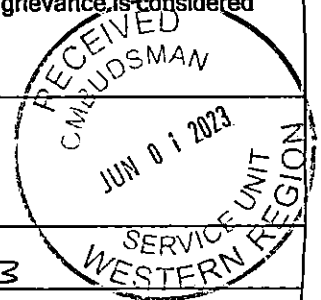
**Upon further investigation it was determined:** Unit Mgr. Boyd reviewed the video camera and could not confirm the claims you made against Officer Blackburn. On May 30, 2023, Officer Blackburn was questioned about this incident, and he stated that you were given a warning due to your behavior in the pod. He stated you had your fists up like you were boxing another inmate. Staff conduct is monitored and enforced regularly according to DOC procedure. DOC procedure is specific in the expectations of conduct of staff. Staff are trained, supervised, and monitored according to procedure.

**The Procedure and content that governs this issue:** Operating Procedure 135.2, Rules of Conduct Governing Employees Relationships with Offenders.

**Determination:** Based on review of the above information there has been no apparent violation of policy, your grievance is considered to be **Unfounded**. Regarding your Suggested Remedy, no further action is necessary at this time.

If you are dissatisfied with the Level I response, you may appeal within 5 calendar days to:

Regional Admin. 3313 Plantation Road NE, Roanoke, VA 24012



*J. Atis*  
Level I Respondent Signature

5-31-2023  
Date

I wish to appeal the Level I response because: *Unit Manager stated that Officer Blackburn admitted to not saying anything to me 5-4-2023, now Officer Blackburn is making up an allegation that he gave me a warning due to my behavior.*

*Officer Blackburn is not telling the truth about what he truly said to me. Officer Blackburn threatened to shoot me because I hit staff. He's speaking on what took place with me at Pocahontas State Corr. Center. I'm asking for protection please.*

Offender Signature *Isaw Black* 1106405

Date 5-31-2023

Exhibit D

C139



# COMMONWEALTH of VIRGINIA

*Department of Corrections*

HAROLD W. CLARKE  
DIRECTOR

P. O. BOX 26963  
RICHMOND, VIRGINIA 23261  
(804) 674-3000

June 30, 2023

Inmate Isaw Blake, # 1106405

RE: Inmate Isaw Blake, # 1106405  
Wallens Ridge State Prison

Re: Virginia Department of Corrections Investigation Status  
Case No: 230452

Inmate Blake:

An investigation has been conducted concerning the allegation you made on March 30, 2023, at Wallens Ridge State Prison. The investigation has been completed and appropriate action may be taken if required.

Sincerely,

R. W. Henderson

Special Agent, VADOC Special Investigations Unit

cc: Warden, J. Artrip  
Lieutenant, Matthew Fleming

Phone: 877-887-3829

Alt Phone: 423-892-9729

FAX: 888-405-0653

**MOBILEIMAGES***Exhibit F***PATIENT REPORT**

**PATIENT NAME:** BLAKE, ISAW  
**DATE OF BIRTH:** 08/09/1982  
**PATIENT ID:** 246415  
**FACILITY:** WALLENS RIDGE STATE PRISON  
**ROOM #:** MEDICAL

**DATE OF SERVICE:** 09/15/2022  
**REFERRING PHY.:** MULLINS, BENNY C  
**TECHNOLOGIST:** Mark Miller  
**INTERPRETING COMPANY:** Flex TeleRad, LLC  
**REASON:** PAIN, TRAUMA  
ARRIVED AT 1350

**Results Document ID:** 859776

**PROCEDURE:** 70140 - FACIAL BONES, LESS THAN 3 VIEWS

**FINDINGS:** Facial pain

FACIAL BONES 3 views:

COMPARISON: NONE PROVIDED

**FINDINGS:**

There is no evidence of displaced fracture or dislocation. The orbits are suboptimally imaged. The visualized portions of the paranasal sinuses are grossly clear. There is a double density consistent with soft tissue mass projecting over the frontal bones on the lateral view consistent with hematoma measuring 13 by 37 mm.

**IMPRESSIONS:**

**IMPRESSION:** Limited evaluation in the absence of a Waters view  
1. No acute traumatic osseous abnormality, soft tissue mass likely hematoma over the frontal bone.

**INTERPRETING DOCTOR:** Curt Liebman MD

**ELECTRONICALLY SIGNED:** Curt Liebman MD Thu, Sep 15, 2022 15:53:03 EDT



**Flex TeleRad, LLC is Accredited by The Joint Commission**

MOBILE IMAGES

Exhibit G

ID: #349551 Page 1 of 1  
Phone: 877-887-3829  
Alt Phone: 423-892-9729  
FAX: 888-405-0653

## PATIENT REPORT

PATIENT NAME: BLAKE, ISAW  
DATE OF BIRTH: 08/09/1982  
PATIENT ID: 246415  
FACILITY: WALLENS RIDGE STATE PRISON  
ROOM #: MEDICAL

DATE OF SERVICE: 09/15/2022  
REFERRING PHY.: MULLINS, BENNY C  
TECHNOLOGIST: Mark Miller  
INTERPRETING COMPANY: Flex TeleRad, LLC  
REASON: PAIN, TRAUMA  
ARRIVED AT 1350

Results Document ID: 859774

PROCEDURE: 71100 - LEFT RIBS, UNILAT, 2 VIEWS

FINDINGS: Left chest pain

LEFT RIBS three views

COMPARISON: NONE PROVIDED

FINDINGS:

There is no evidence of displaced rib fracture or rib lesion. No subcutaneous emphysema is seen. The included visualized portions of the chest reveal no evidence of an active process, no pneumothorax.

IMPRESSIONS:

IMPRESSION:

Normal, no acute traumatic osseous abnormality.

INTERPRETING DOCTOR: Curt Liebman MD

ELECTRONICALLY SIGNED: Curt Liebman MD Thu, Sep 15, 2022 15:50:55 EDT



Flex TeleRad, LLC is Accredited by The Joint Commission



Exhibit I

VIRGINIA  
DEPARTMENT OF CORRECTIONS

Health Services Complaint and Treatment Form 720\_F17\_10-21

## Health Services Complaint and Treatment Form

WALLENS RIDGE STATE PRISON

Facility:

Inmate/CCAP

Probationer/Parolee

Name:

Blake  
LastIsaw  
First

DOC #:

1106405

Date/Time	Complaint and Treatment	Signature and Title
9-13-22 3:35 PM	Inmate received to Wallens Ridge State Prison as a new intake. Verbal and written orientation provided. Inmate verbalized understanding of all intake orientation. Chart to be reviewed for current medications.	(Callow)
9-13-22 3:50 PM	Arrived at WRSP has large swollen area noted to R side of forehead and R eye swollen shut. Denies having a hospital visit or x-ray will keep in medical observation until seen by MD.	(Callow)
9-13-22 3:50 PM	seen in medical status had been in quarantine x 30 days denies contact with COVID positive person denies any symptoms complains of rib, back, ankle, and elbow pain no bruising noted speech clear alert + oriented, walks with limp due to ankle pain MD to see in AM.	(Callow)
9-13-22 a 1:05	C - Soreness @ ribs & @ face O - Has swelling @ face at and above eye and cheek. Dictations VS, Wagner RN present. Mentally alert. I - Ibuprofen 200mg @ tabs orally 2x daily for 5 days per Nursing Guidelines so Dr. Miller 5/8/22	



VIRGINIA DEPARTMENT OF CORRECTIONS

Revision Date: 10/29/2021



VIRGINIA  
DEPARTMENT OF CORRECTIONS

Intra-system Transfer Medical Review, DOC 726-B 720\_F9\_4-22

### Intra-system Transfer Medical Review, DOC 726-B

Inmate/Probationer/Parolee Name <b>Blake, Isaac</b>		DOC Number <b>1106405</b>	Release Date <b>2-22-2033</b>	Transfer Date <b>9-13-2022</b>
Received At <b>WRSP</b>	Received From <b>PSCC</b>	# Medical Charts Sent <b>1</b>	Allergies <b>NKDA</b>	
Medical Code <b>A 19C 9</b>	Location Code <b>B</b>	Mental Health Code <b>2</b>	Last HIV (Date and Results) <b>5-8-16 NR</b>	
Last TST (Date and Results) <b>7-20-21 <del>Pos</del></b>	Date of last Tetanus, Td, or Tdap <b>1-22-18</b>	Last HCV (date and Results) <b>10-26-21 Neg</b>		
Vital Signs		Special Diet		
Temperature: <b>97.7</b> Pulse: <b>78</b> Respiration: <b>98%</b>		Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
Weight: <b>240</b> Blood pressure: <b>134/86</b>		Type: _____ Date: _____		

### Current Medications

Drug	Amount Sent	Drug	Amount Sent
1. <b>Zoloft 50mg 1 1/2 tabs</b>	<b>3 Doses</b>	5.	
2. <b>Crestor 10mg</b>	<b>0</b>	6.	
3.		7.	
4.		8.	

Disability (Explain): **N/A**

Prosthetics:

Medical Devices / Equipment:

Current Medical/Dental Problems: **Needs HZV + HCV Test**

Is the individual enrolled in an ID clinic:

HCV ☐ VCU ☐ DOC ☐ HIV at VCU ☐

### Mental Health Screening:

- Present suicidal ideations? ☒ No ☐ Yes: \_\_\_\_\_
- History of suicidal behavior/self-directed violence? ☐ No ☐ Yes: \_\_\_\_\_
- Presently prescribed psychotropic medications? ☐ No ☐ Yes: \_\_\_\_\_
- Any current M. H. complaints? ☒ No ☐ Yes: \_\_\_\_\_
- History of inpatient/outpatient mental health treatment? ☐ No ☐ Yes: \_\_\_\_\_
- Current mental health treatment? ☒ No ☐ Yes: \_\_\_\_\_
- Any recent use of alcohol or drugs (frequency, amount, last use)? ☐ No ☐ Yes: \_\_\_\_\_
- Any history of substance abuse? ☐ No ☐ Yes: \_\_\_\_\_
- Any history of substance abuse disorder treatment? ☐ No ☐ Yes: \_\_\_\_\_
- Observed symptoms of Psychosis ☐ Depression ☐ Anxiety ☐ Aggression ☐

### Pending Appointments:

ID Clinic:	HCV:	DOC:	VCU:
	HIV:		

**\*\*Please copy 720\_F24 and 720\_F9 and give to OSS or Scheduler to confirm appointments/labs\*\***





VIRGINIA  
DEPARTMENT OF CORRECTIONS

Intra-system Transfer Medical Review, DOC 726-B 720\_F9\_4-22

**Overall Comments:** (i.e., - general appearances and behavior, level of consciousness (alertness, orientation) physical deformities, abuse, trauma, etc.)

*Cooperative. Man large knot to R side of forehead and R eye swollen.*

**Medical Disposition:**

General Population: ☐ GP with Health/MH Referral: ☐ Intake/Reception: ☐ Intake/Reception with Health/MH Referral: ☐  
Infirmary: ☐ Medical Observation Unit: ☒

Emergency referral for MH Care: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
(Name of Psychology Associate notified)

Referral for Emergency Treatment: \_\_\_\_\_

Nurse Signature: *Clatton*  
Date: *9-13-20*

Medical Handout Orientation Issued: ☒

Dental Hygiene Handout Issued: ☒





VIRGINIA

DEPARTMENT OF CORRECTIONS

Health Services Complaint and Treatment Form 720 F17 10-21

# Health Services Complaint and Treatment Form

Facility: Pocahontas State Correctional Center

Inmate/CCAP  
Probationer/Parolee

Name: Blake Isaw Last First

DOC# 1106465

Date/Time:

Complaint and Treatment

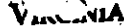
Signature and Title

5-6-22 10:30pm	c.) Evaluation following alleged altercation	
Refused.		
	0.) Inmate reports feeling fine. refused vitals. mild swelling noted to cheek bone @ side.	
	Denies blurred vision. Reports having elbow pain in certain positions. Full room noted no deformities noted. At OX3, Respiration even and non labored. Skin warm and dry. I.) Per nursing guidelines Give Tylenol 300mg 2 tab PO BID x 5 days PRN.	
	Schedule to see MD 5-9-22.	V. Grossman
	Noted 5-6-22 @ 6:10 AM V. Grossman.	
	Noted 10/11/22 @ 3:22pm	
5-9-22	Inmate refused SL E MD	
9/13/22	Altercation - FM attack officer - He c. i. reflex 1120 -> Copy to lab	
	Noted 09-13-2022 @ 0900	
	Noted 9/13/22 @ 1420 11 Penett, RN	
9-13-22 0900	Nurse to BHU to evaluate inmate following alleged altercation. OX3.	
	Press - rapid & shallow. OX3.	
	Go H/A, shoulder & wrist pain.	
	Up obvious distress etc. Sp	
	Restraints applied correctly	



VIRGINIA DEPARTMENT OF CORRECTIONS

Revision Date: 10/29/2021



**Health Services Complaint and Treatment Form 720\_F17\_10-21**

**Facility:** PSCC

Blake  
Last

Osaw  
First

DOC#: 1106405

**Date/Time**

### Complaint and Treatment

**Signature and Title**

[illegible]